



EXPRESS MAIL: EV333997975US

DATE: March 15, 2004

Response to Office Action

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Attorney Docket No.	STAN-072CON
Confirmation No.	8958
First Named Inventor	A. Hsueh
Application Number	09/682,667
Filing Date	October 4, 2001
Group Art Unit	1642
Examiner Name	S. Huff
Title: <i>Mammalian Pro-Apoptotic Bok Genes and their Uses</i>	

Sir:

This amendment is responsive to the Office Action dated August 13, 2003. In view of the remarks put forth below, reconsideration and allowance are respectfully requested.

Image

03-17-04

1642

Please type a plus sign (+) inside this box →



PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/682,667
		Filing Date	October 4, 2001
		First Named Inventor	HSUEH, AARON, J.W.
		Group Art Unit	1642
		Examiner Name	HUFF, SHEELA JITENDRA
Total Number of Pages in This Submission	11	Attorney Docket Number	STAN-072CON
ENCLOSURES (check all that apply)			
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group	
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences	
<input checked="" type="checkbox"/> Revised Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)	
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information	
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter	
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):	
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<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	2. Postcard	
<input type="checkbox"/> Certified Copy of Priority Documents	<input type="checkbox"/> CD, Number of CD(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application			
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Signing Attorney/Agent (Reg. No.)	PAMELA J. SHERWOOD. 36.677 BOZICEVIC, FIELD & FRANCIS LLP		
Signature			
Date	March 15, 2004		

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